

NATIONAL Assessment Centre Services

[Ref: 1 Jan'05]

MA118072361

Date In: 416118 16:43	Job description	Date & Time Completed	Done by
Ref No: MA118072361	SAS e-filing		
Veh No: SLP 581M	E-mail (within 5hrs, AIC 2hrs)		
D.O.A: 116118 16:10	i-Motor Claim Form		
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel: (Fax: (
TP Particulars:	Veh No: SJN1554U	INC () / Non-INC ()
Owner / Driver: (Tel: (
Policy No: (Period: (Cover Type: (
Confirmed by: (Date: (Time: (
Insured/Driver Liability: ([Note-Est. Status (WO): N: 0-20%; P: 21-79% F: 80-100%]	
Year of Registration: (Warranty: YES () / NO ()	
Excess: (\$	Loading: \$1,000 () / \$2,000 ()	

General Remarks:-

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

MA1803515	Invoice Preparation Checklist	Ant (\$)	Ant (\$)
		1st Bill	Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);	30.00	
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	Q1:		
QC Checked by (Engr-In-Charge):	*N5: Courtesy Car / Tpl Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
Auditors' Comments:-	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idac Mobile 30		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	04/06/2018 16:43
Date Of Accident	01/06/2018 16:10
Exact Location Of Accident	PARK CRESCENT NEAR CIDS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP581M
Insured/Policyholder	
Name Of Registered Owner	ZHANG CUI PING
NRIC No	S2616392G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97711138
Alternative Phone No	OFFICE-97711138

Vehicle Particulars

Manufacturer	BMW
Model	116D 5DR HATCH DSC LED
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD17V06756/VPC2/R00
Cover Note Number	-

Driver

Name of Driver	SEOW SENG CHUAN
NRIC No	S1177400H
Date Of Birth	01/10/1955
Occupation	OUTDOOR
Date Of Driving Pass	19/07/1979
Driving Experience	38 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94517018
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 310 CANBERRA RD #10-133
Postcode	750310
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJN1554U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MATTEW CHUAH CHENG HAI
NRIC/Passport Number	
Contact Number	97731248
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

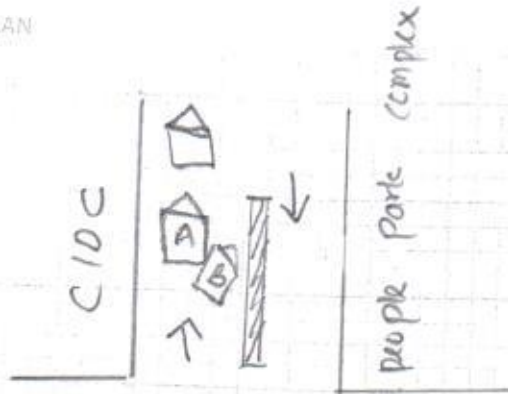
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)

Reporting Centre Personnel's Stamp

SKETCH PLAN



A : SLP 581M

B : GJN 15544

Eu Tong Sen

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 01/06/18 around 4:45pm, along park crescent, I came to stop because of stationary traffic. Vehicle B GJN 15544 was impatient. tried to overtake my vehicle on a one lane traffic but ended up hitting my rear RH portion. We came to exchange particular. On 02/06/18 Vehicle B told me he wanted to settle it as private settlement but ended up he ask me to proceed to third party claim.

DECLARATION

(I/We declare the foregoing particulars are true in every respect.)

[Signature]

[Signature]

(if driver is not the policyholder)
Date & Time:

[Signature]

(representing the insurance company's signature)
Name:
NRIC/FIN No.:

VEHICLE NO: SLP 581M

MAKE & MODEL : BMW 116

DATE OF ACCIDENT	01 / 06 / 2018	
TIME OF ACCIDENT	4 08 AM / PM	
LOCATION OF ACCIDENT	Park Crescent near CDS	
Exact Purpose use during accident		
NAME OF OWNER	Zhong Cui Ping	
TELP NO	9771 1138	
NRIC	S26163926	
CLAIM TYPE	OD / THIRD PARTY / Reporting Only	
PRIVATE HIRE	YES / NO?	
INSURANCE CO.	Liberty Insurance	
TYPE OF CAVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	C0041979	
NAME OF DRIVER	As above / If No: Seow Seng Chuan	
NRIC	S11774004	Any passengers: 1 f
DATE OF BIRTH	01 / 10 / 1955	
OCCUPATION	Outdoor / Indoor	
DATE OF DRIVING PASS	19 / 07 / 1979	
GENDER	Male / Female	
CONTAC NO.	9451 7018	Office: Home:
ADDRESS	81K 310 Canberra Road # 10-133 (S) 750310	
DRIVER HAVE ANY OWN Vehicle	NO / If yes: Reg No:	
RELATIONSHIP	Employee / If No: Wife	
WEATHER CONDITION	Clear / Raining / Other:	
ROAD SURFACE	Dry / Wet / Other:	
ANY INJURIES	No / If yes: Who?	
CONTAC NO.		
POLICE REPORT	No / If yes: Where?	
VEHICLE B NO.	SJN 1554U	Any Passenger:
NAME	Mattew chun cheng Hai	S11770221
CONTAC NO.	9773 1248	
VEHICLE C NO.		Any Passenger:
VEHICLE D NO.		Any Passenger:
VEHICLE E NO.		Any Passenger:
VEHICLE F NO.		Any Passenger:
ANY WITNESS		
WITNESS CONTACT NO.		
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / NO	
PARTICULAR WORKSHOP	Sme Motor Pte Ltd	
TELP NO	1 Kaki bukit ave 6 #02-15	
FAX NO.	Singapore 417883	
	Telp: 67476106 (6 lines)	
	6 Speed Autoworkz Pte Ltd	
	9001 7628 Sdn Wang	
	Fax: 6384 7039	
	email: 6speedautoworkz@gmail.com	

NOTICE OF REPORTING

This is to confirm that Seow Seng Chuan S1177400H, driver of vehicle reg: SLP581M has reported to the Police a non-injury traffic accident which occurred along Park Cres Road towards Upper Cross St on 01/06/2018 at around 04.30pm involving the following vehicles,

- 1) SLP581M - Complainant
- 2) SJN1554U – S1477022D, Matthew Chuah Cheng Hai

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: Sgt (2) Joel

Date: 02/06/2018 Time: 02.53pm

S/D Ref : ESD#26

Police Post/Unit : River Valley NPC

Original - to be issued to informant

Duplicate - to be submitted to Traffic Police

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait of SEOW SENG CHUAN

Licence Number: **S1177400H**

Name: **SEOW SENG CHUAN**

Birth Date: **01 Oct 1955**

Issue Date: **29 Jan 2014**

Barcode: 002269909F

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S1177400H**

Portrait of SEOW SENG CHUAN

SEOW SENG CHUAN

翁盛铨

Race: **CHINESE**

Date of birth: **01-10-1955**

Sex: **M**

Country of birth: **SINGAPORE**

ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

		EFFECTIVE DATE
s 2B	Motorcycles =< 200 cc	01 Mar 1966
s 3	Motor Cars =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	19 Jul 1979



2298988

Barcode

NRIC No: **S1177400H**

Portrait of SEOW SENG CHUAN

Blood Group: **A+**

Date of birth: **22-08-1994**

Address: **APT BLK 310 CANBERRA ROAD #10-133 SINGAPORE 750310**

NRIC No: **S1177400H**

Date: **05-10-2005**

No: **5275576**

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S2616392G

Name

ZHANG CUI PING

张崔萍

Race

CHINESE

Date of Birth

25-11-1963

Sex

F

Country of Birth

CHINA





2624149



82616392G

APT BLK 310 CANDELA ROAD #10-133
SINGAPORE 750310

82616392G

DATE 05 11 2011

Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No SD17V06756 /NPC2 /R00
Form MX1

Date of Issue 30-MAY-2017
1. Index Mark and Registration No. of Vehicle: SLP581M
2. Chassis number of Vehicle: WBA1V72090V725902
3. Name of Policyholder: ZHANG CUI PING
4. Effective date of Commencement of Insurance for the purposes of the Act: 25-MAY-2017 00:00 AM
5. Date of Expiry of Insurance: 24-MAY-2019 23:59 PM

6. Persons or Classes of Persons entitled to drive*:

A) The Policyholder.

B) Any other person who is driving on the Policyholder's order or with his permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

7. Limitations as to use*:

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

8. The Policy does not cover:

A) Use for hire or reward.

B) Use for racing, pace-making, reliability trials or speed-testing.

C) Use for the carriage of goods (other than samples) in connection with any trade or business.

D) Use for any purpose in connection with the Motor Trade.

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia) are not to be included under these headings.

I/We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

For and on behalf of
LIBERTY INSURANCE PTE LTD
Approved Insurers



Authorized Signature

For information only:

COVERAGE :

SUM INSURED:

EXCESS:

FINANCE COMPANY:

PRODUCER NAME:

Comprehensive, Unlimited Windscreen, NCD Protection

MARKET VALUE AT THE TIME OF LOSS

Section I S\$600, Additional Excess For Young & Inexperienced Drivers S\$2500, Windscreen Excess S\$0

DBS BANK LTD

SD CONTEGO SERVICES

SCCA 20180604

Ver.1.260705